## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

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FILING DATE

10/29/2001

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01/12/2010 26304 7590

KATTEN MUCHIN ROSENMAN LLP 575 MADISON AVENUE NEW YORK, NY 10022-2585

Customer Number: 026304

APPLICATION NO.

10/005 088

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100794-00057(FLUI

19.116)

9354

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/12/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS			
TRAN, NGHI V		2451	709-223000			
. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the patent front page, list		Katten Muchin	
FR 1.363).  Change of correspondence address (or Change of Correspondence			<ol> <li>the names of up to 3 registered patent attorney or agents OR, alternatively,</li> </ol>		Rosenman LLP	

Hidevasu Kanemaki

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required.

TITLE OF INVENTION: METHOD AND DEVICE FOR RESERVING TRANSMISSION BAND ON INTERNET

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CrR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE FUJITSU LIMITED

Kawasaki, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🕱 Corporation or other private group entity 🗀 Government 4b Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a The following fee(s) are submitted: 4 check is enclosed

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The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50/000 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

b. Applicant is no longer claiming SMALL ENTITY status. Sce 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

/ Dexter T. Chang / Date 03/25/2010 Authorized Signature Registration No. 44,071 Dexter T. Chang Typed or printed name

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